



ORANGE COUNTY SHERIFF'S DEPARTMENT

SHERIFF-CORONER
SANDRA HUTCHENS

July 10, 2018

MuckRock
DEPT MR 44608
411 A Highland Ave
Somerville, MA 02144-2516

RE: Your request for threat assessments, field reports and intelligence updates focusing on several groups for the period 1/1/17 to present.

Dear Mr. Waltman:

This letter is in response to the above-referenced requests received by the Sheriff's Support Services Division on Wednesday, October 18, 2017.

The enclosed disk houses the records responsive to your request. Please be advised that we redacted names of undercover officers, cellphone numbers and non-public email addresses from the responsive records. (Gov't. Code §§ 6254(c) and (k), 6255; Art. 1 §1 of the Cal. Constitution) We also redacted the names of officers of outside agencies because we are not authorized to release those names.

Please be advised that records responsive to your request are being withheld pursuant to Government Code section 6254(f) (law enforcement investigatory and security records), and, 6255 (public interest in disclosure outweighed by public interest in non-disclosure).

If you have any questions please contact Systems Technician Kris Garcia at 714-834-6480.

Sincerely,

Kirk Wilkerson
Director/Chief Information Officer
Support Services Division

KW: kg

Enclosure

cc: Capt. Park, Homeland Security Division
Public Affairs

320 N. FLOWER STREET, SANTA ANA, CA 92703 (714) 834-6454

7006 0100 0000 4442 4802

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

SANTA ANA, CA
 JUL 11
 Postmark
 2018
SPURGEON STA USPS

Sent on MUCKROCK Sept MA 44608
 Street, Apt. No.,
 or PO Box No. 411 A Highland Ave
 City, State, ZIP+4[®] Somerville MA 02144-2516

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 		<p>A. Signature X <u>[Signature]</u> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery _____</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>2018</p>	
<p>1. Article Addressed to:</p> <p><u>MUCKROCK</u> <u>Sept MA 44608</u> <u>411 A Highland Ave</u> <u>Somerville, MA 02144-</u> <u>2516</u></p>		<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail[®] <input type="checkbox"/> Priority Mail Express[™] <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
<p>2. Article Number (Transfer from service label)</p>		<p>7006 0100 0000 4442 4802</p>	
<p>PS Form 3811, July 2013 Domestic Return Receipt</p>			